

# Work Order ID 61274

August 12, 2010 10:17:40 AM



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Item ID: D3118-3

Accept



Setup Start



Revision ID:

Stop



Item Name: Sign Assembly

Start Date: 8/12/10 Start Qty: 2.00



Cust Item ID:

Required Date: 8/13/10 Req'd Qty: 2.00

Customer:

Reference: RA110080 - RETURN

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

D3118

Rev C

120

QC6- Inspect dimensions to drawing

0.00



QC

Memo

0.00

Quality Control

INSPECT RA110080

8/10/06/12

22

130

Identify as per dwg & Stock Location 35

0.00



Packaging

Memo

0.00

Packaging

RETURN TO STOCK USING NEW B/N

10/8/12 SD 24

140

QC21- Final Inspection - Work Order Release

0.00



QC

Memo

0.00

Quality Control

10/08/16

ME 10-8-16

**Picklist Print**

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Work Order ID: 61274



Parent Item: D3118-3



Parent Item Name: Sign Assembly

Start Date: 8/12/10

Required Date: 8/13/10

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP A: 02.05.15 New Issue NG

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D3118-3		Manufactured	No				Each	6.0000		2			
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Sign Assembly



B45265 r2

8/10/12

RA 110080

LocationLoc QtyLoc Code

ST037

6

60317

6

ORIGINAL B/N 45265

DART

#RA: 110080  
Date: \_\_\_\_\_Initiator: \_\_\_\_\_  
Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone No.: \_\_\_\_\_Invoice #: \_\_\_\_\_  
SO#: \_\_\_\_\_

Copy of DHS Return Authorization #: \_\_\_\_\_

SQ#: \_\_\_\_\_ NCR#: \_\_\_\_\_ CSR#: \_\_\_\_\_ PAR#: \_\_\_\_\_

Reason for Return: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Receiving: \_\_\_\_\_ Prepaid ☐ Collect ☐  
Date Received: \_\_\_\_\_ Freight Company: Fedex

Qty	Part #	Batch #	Description	Advise QA	Date
<u>2</u>	<u>D3118-3</u>	<u>45265</u>	<u>Emergency exit</u>		<u>10/6/19</u>

Condition of Packaging: Good Photograph Required: ☐ yes ☐ noPaperwork Attached: P/S X Invoice \_\_\_\_\_ ARC \_\_\_\_\_ Docs \_\_\_\_\_ Other \_\_\_\_\_QC: \_\_\_\_\_ Condition of Part: ☒ Sealed / ☐ Accepted / ☐ Damaged / ☐ Scrap  
Quarantine Location: QCInspectors Initial: S Date: 10/06/12 Photograph Required: ☐ yes ☒ no

Qty	Part #	CHG #	Batch #	QC Comments	QC Approval		Scrap
					Initial	W/O#	
<u>12</u>	<u>D3118-3</u>	<u>AWC</u>	<u>45265</u>	<u>Good no Damage</u>	<u>L</u>	<u>61274</u>	
				<u>Put back in to stock as is</u>			
				<u>no work needed</u>			

QA Coordinator: \_\_\_\_\_

Advise GM as to Findings: \_\_\_\_\_ Initial: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_Issue Credit: ☐ yes ☐ no

GM Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Invoice Amount: \_\_\_\_\_  
Less Replacement: \_\_\_\_\_  
Restock Fee: \_\_\_\_\_  
Freight: \_\_\_\_\_  
Net Credit: \_\_\_\_\_  
DHS ☐ Customer ☐

QA: Enter into Q-Pulse with Reason for Return &amp; File original. Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Copy of Customer Return to stay with work orders and another copy to be filed with customer credit